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PATENT
Attorney Docket No. MEE-005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Adamis et al.
SERIAL NO.: 09/478,099 GROUP NO.: 1632
FILING DATE: January 5, 2000 EXAMINER: Anne Marie Falk
TITLE: Targeted Transscleral Controlled Release Drug Delivery to the Retina
and Choroid

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 19th day of September, 2003.

Keri A. Lennon

Keri A. Lennon

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith is/are:

Transmittal Form (1 page); Fee Transmittal (1 page); Amendment and Response (12 pages) including Exhibits A-C; Petition for Extension of Time Under 37 CFR 1.136(a) (1 page); Information Disclosure Statement (2 pages); Form PTO-1449 (2 pages); copies of cited references A98-A99, B13-B14, and C9-C23; a check in the amount of \$235.00; and a return receipt postcard.



**TRANSMITTAL
FORM**

Application Serial Number	09/478,099
Filing Date	January 5, 2000
First Named Inventor	Adamis
Group Art Unit	1632
Examiner Name	Anne Marie Falk
Attorney Docket No.	MEE-005
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input checked="" type="checkbox"/> Amendment/Response, including Exhibits A-C <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]	<input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	
<input checked="" type="checkbox"/> Petition for Extension of Time		
<input checked="" type="checkbox"/> Information Disclosure Statement <input checked="" type="checkbox"/> Form PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above		

CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
Testa, Hurwitz & Thibeault, LLP
High Street Tower
125 High Street
Boston, MA 02110
Tel. No.: (617) 248-7000
Fax No.: (617) 248-7100

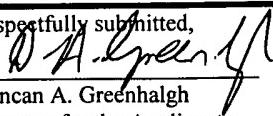
SIGNATURE BLOCK

Respectfully submitted,

Duncan A. Greenhalgh
Atty/Agent for Applicant(s)
Testa, Hurwitz & Thibeault, LLP
High Street Tower
125 High Street
Boston, MA 02110

O I P FEE TRANSMITTAL FY 2003		<i>Complete if Known</i>	
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METHOD OF PAYMENT				FEE CALCULATION (continued)																																																																																																																
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other				3. ADDITIONAL FEES <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity</th> <th style="text-align: left;">Small Entity</th> <th colspan="2"></th> </tr> <tr> <th>Fee (\$)</th> <th>Fee (\$)</th> <th colspan="2">Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>130</td><td>65</td><td colspan="2">Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>50</td><td>25</td><td colspan="2">Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>130</td><td>130</td><td colspan="2">Non-English specification</td><td></td></tr> <tr><td>2,520</td><td>2,520</td><td colspan="2">Request for ex parte reexamination</td><td></td></tr> <tr><td>110</td><td>55</td><td colspan="2">Extension for reply within first month</td><td>55.00</td></tr> <tr><td>410</td><td>205</td><td colspan="2">Extension for reply within second month</td><td></td></tr> <tr><td>930</td><td>465</td><td colspan="2">Extension for reply within third month</td><td></td></tr> <tr><td>1450</td><td>725</td><td colspan="2">Extension for reply within fourth month</td><td></td></tr> <tr><td>1970</td><td>985</td><td colspan="2">Extension for reply within fifth month</td><td></td></tr> <tr><td>320</td><td>160</td><td colspan="2">Notice of Appeal</td><td></td></tr> <tr><td>320</td><td>160</td><td colspan="2">Filing a brief in support of an appeal</td><td></td></tr> <tr><td>280</td><td>140</td><td colspan="2">Request for oral hearing</td><td></td></tr> <tr><td>130</td><td>130</td><td colspan="2">Petitions to the Commissioner</td><td></td></tr> <tr><td>180</td><td>180</td><td colspan="2">Submission of Information Disclosure Statement</td><td>180.00</td></tr> <tr><td>750</td><td>375</td><td colspan="2">Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>750</td><td>375</td><td colspan="2">For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>100</td><td>100</td><td colspan="2">Certificate of Correction for applicant's error</td><td></td></tr> <tr><td>110</td><td>55</td><td colspan="2">Submission of Terminal Disclaimer</td><td></td></tr> <tr><td colspan="4">Other fee (Specify)</td><td></td></tr> <tr><td colspan="4">Other fee (Specify)</td><td></td></tr> </tbody> </table>				Large Entity	Small Entity			Fee (\$)	Fee (\$)	Fee Description		Fee Paid	130	65	Surcharge - late filing fee or oath			50	25	Surcharge - late provisional filing fee or cover sheet			130	130	Non-English specification			2,520	2,520	Request for ex parte reexamination			110	55	Extension for reply within first month		55.00	410	205	Extension for reply within second month			930	465	Extension for reply within third month			1450	725	Extension for reply within fourth month			1970	985	Extension for reply within fifth month			320	160	Notice of Appeal			320	160	Filing a brief in support of an appeal			280	140	Request for oral hearing			130	130	Petitions to the Commissioner			180	180	Submission of Information Disclosure Statement		180.00	750	375	Filing a submission after final rejection (37 CFR 1.129(a))			750	375	For each additional invention to be examined (37 CFR 1.129(b))			100	100	Certificate of Correction for applicant's error			110	55	Submission of Terminal Disclaimer			Other fee (Specify)					Other fee (Specify)				
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